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## BIB DATA SHEET

CONFIRMATION NO. 5057

<b>SERIAL NUMBER</b> 09/611,054	<b>FILING or 371(c) DATE</b> 07/06/2000 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 3691	<b>ATTORNEY DOCKET NO.</b> 481340010023		
<b>APPLICANTS</b> Torn Gray, Carp, CANADA; Michael Weiss, Ottawa, CANADA;						
<b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> UNITED KINGDOM 9916208.3 07/09/1999						
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 08/22/2000						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/STEFANOS KARMIS/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance SK Initials	<b>STATE OR COUNTRY</b> CANADA	<b>SHEETS DRAWINGS</b> 18	<b>TOTAL CLAIMS</b> 36	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> David B Cochran Jones Day Reavis & Pogue North Point 901 Lakeside Avenue Cleveland, OH 44114 UNITED STATES						
<b>TITLE</b> Mechanism for sharing of guaranteed resources						
<b>FILING FEE RECEIVED</b> 978	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			